

Women and AIDS

COMPILERS' COMMENTS

Recently, our cell group decided that it wanted to include doing service as part of its “being together.”

We decided that since we lived in an HIV/AIDS affected society, it would be good to have some hands on connection to what it means to be closely affected by this disease. Most of us, though well-versed in the crisis and even working daily in the fight against HIV/AIDS, are not often impacted in a personal way by this overwhelming, all-encompassing disaster here in Botswana. We felt that, to be true disciples of God, we needed to turn our words into deeds and visit the sick.

We went for our first visit a few weeks ago to Princess Marina Hospital, the local government hospital in Gaborone. Indeed, we came face to face with the ravishing devastation of the disease. We visited in pairs so we could provide support to each other. The women went to the women's ward, and my partner and I were in the section of the ward where most of the women were in the last stages of their battle against AIDS. We prayed with a woman constantly spitting blood into a tissue, with someone who was emaciated and weak, and with another who was bloated and suffering from stomach pain. During our visit, another visitor burst into prayer for her relative and the whole ward stopped and prayed with her. Everyone wanted our prayers and our touch.

After our visit, our cell group gathered to reflect and pray more. We prayed for the sick to have courage and to receive healing. We prayed for ourselves to have courage and the will to continue our ministry. We asked Jesus to enter into all of our lives—both the sick and the well—in a special way. And we asked for hope for the sick and for ourselves in the midst of all the despair. In coming face to face with the terminally ill, we had met God in a special way not usual in our day-to-day work and lives. There was an overwhelming sense that God was there before we arrived and was with us as we met the devastation of HIV/AIDS in a very personal way.

In this issue of *Women's Concerns Report*, we wish to share the hope we see amidst the despair in the battle against this invasive, worldwide pandemic that is a very personal battle for every individual who faces it. Last year, the Botswana Christian AIDS Intervention Programme (BOCAIP), an organization responding to AIDS throughout Botswana, chose the theme “Providing Hope Amidst Despair.” In the nine BOCAIP centers, counselors face daily the reality of wrenching poverty, dysfunctional homes, orphaned children, and people who are very ill and dying of illnesses caused by HIV/AIDS. Where do they find hope? Perhaps they find it in the prayers from the Moruti (pastor) praying for someone desperately ill in the hospital, in the look of gratitude of a patient unable to get a drink of water for herself,

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Ruth Thiessen edited the last *Women's Concerns Report* issue on Women and AIDS in 1996. She is a wife and mother of a 25-year-old son. After two and a half years, she is still delighted to be back in Africa.

Sandra Franklin is the Co-Country Representative of Botswana with her husband David. She previously served four years in Bangladesh and worked in Akron, Pennsylvania in Human Resources.

in the loving care "Moms" give the orphans in the daycare centers, in trainers giving urgently needed counseling skills to counselors-in-training, in preventing the suicide of a newly-diagnosed young adult, or in the young HIV positive woman seeking security for her children because she knows she might not live long. Finding hope in small ways provides the courage to continue in the long battles ahead. In this issue, we wish to provide glimpses of the despair and the hope.

There are stories from a counselor in Botswana, caregivers in Zimbabwe and British Columbia, and women living with AIDS in Botswana, South Africa, Cambodia, Honduras and British Columbia. They are stories of infinite pain and immeasurable courage and faith.

The Holy Spirit emanates from the lives of all the women we have met in this battle against HIV/AIDS. It gives us a hope that requires that we share their stories with you to help us all understand that HIV/AIDS is more than people without faith or with emaciated pain-wracked bodies full of disease. As much as AIDS is a battle of the body against itself, it is even more so a fight of the spirit against hopelessness, faithlessness and despair. The women in these stories are just a few of the witnesses against this and witnesses for the hope amidst the despair. They are stories that can bring us all closer to God and encourage us to trust that God is with us in all our lives, walking with us through all that brings us despair.

—compiled by Ruth Thiessen and Sandra Franklin

FROM THE editor

Women make up the fastest-growing group of people with HIV/AIDS.

In 1985, seven percent of reported AIDS cases in the United States were women. In 1999, it increased to 23 percent. For women of color in the United States, the situation is even worse.

Between ages 25 and 44, AIDS is the tenth highest cause of death for white women but the third highest killer for African American women and the fourth highest

for Latina women. The proportion of females among adult positive HIV tests in Canada increased from 19 percent in 1995 to about 24 percent in 1999 and 2000. More than 25.3 million people in sub-Saharan Africa are infected with HIV. Of those infected in Africa, 55 percent are women. Twelve to thirteen women are currently infected to every ten men.

One of the reasons for this increase in female HIV infection is biological. Women are two to four times more likely to be infected through heterosexual sex than men are. Women have a larger surface area exposed to their partner's sexual secretions. Microlesions that can occur during intercourse are believed to be an entry point for the virus. This makes very young women even more vulnerable because they have not reached physical maturity. In addition, HIV is more present in sperm than in vaginal secretions. Women and children are also the chief recipients of blood transfusions because of childbirth.

Women are also economically, culturally and socially more susceptible. Peter Piot, Executive Director of the Joint United

The MCC Committees on Women's Concerns believe that Jesus Christ teaches equality of all persons. By sharing information and ideas, the committees strive to promote new relationships and corresponding supporting structures through which women and men can grow toward wholeness and mutuality. Articles and views presented in *REPORT* do not necessarily reflect official positions of the Committees on Women's Concerns.

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Nations Programme on HIV/AIDS, has stated that gender inequality is a fundamental driving force of the AIDS epidemic. Financial dependance on men makes women less able to protect themselves. Women cannot always control when, how and with whom they have sex. They are often not in the position to request the use of a condom. Social norms limit women's access to information about sexual matters. In many cultures, it is acceptable for married and unmarried men to have multiple partners. In some places, men are also seeking younger and younger partners because of the belief that sex with a virgin cures AIDS.

Along with the increase in female HIV positive numbers, women are also affected by AIDS as caregivers. Women are frequently required to take full responsibility for the care of family members with AIDS. This includes financial care and childcare as well as healthcare.

As already indicated, underprivileged people have also been unduly affected by this disease. Most people in Africa do not have drugs available to them that are given to HIV positive mothers in North America that prevents most of their children from contracting the disease. People in underprivileged communities in North America do not receive the education on preventing the virus that other communities receive. Though the disease itself is indiscriminate, the imbalance of power and wealth within North American and around the world has forced the bulk of the pain and suffering on the poor and less privileged.

The women in this issue fit many of these situations. Many contracted AIDS from unfaithful partners. One received a tainted blood transfusion. Others have taken on the care of spouses, children and grandchildren. However they have been affected, they all face the disease with honesty, resolve and hope. They offer us the gift of their stories.

—Debra Gingerich, editor

Note: Information gathered from *The Body: An AIDS and HIV Information Resource* (www.thebody.com) and *The World's Women 2000* by the United Nations.

One gray day

I am 42 years old, married yet single, and infected with HIV/AIDS. I say I am single because, although I live with my husband, he is no longer working, and I carry all the responsibility for our home and our children. I also say I'm single because I am no longer physically intimate with him. I have a 13-year-old son who is in high school and a 10-year-old daughter who is in elementary school. My daughter is also infected with HIV.

I live in San Pedro Sula, Honduras in a small rented apartment. I work as an administrative assistant for a church project. I earn 2,500 Lempiras per month, which is equivalent to about 159 U.S. dollars. I like my job. I try to do my best at work, in spite of all the pain and physical discomfort I suffer. I am very happy because my security is in Jesus who died and rose again, conquering death. I know I am a child of God, and as such I too am a conqueror.

In January of 1990, my husband and I separated, and I moved to another city for ten months. During this time my husband had a romantic involvement with another woman who was infected with AIDS. Later, my husband came back to me, and we got back together. I never imagined he was already infected with AIDS. I slept with him and became pregnant with our daughter. She was born with the virus, but I didn't find this out until 1999 when I first experienced the symptoms of HIV infection. That was the year I had the most unpleasant and disconcerting surprise of my life.

I had no idea what was happening. Three days prior to the day I found out I had AIDS, a nurse from work took me to have some blood work done. I was waiting for these results but really had no idea what was coming. I felt relaxed and confident, unafraid. But when the results came in, no one would tell me anything. Neither the

The author chooses to remain anonymous.

At first I felt as if my whole world had come crashing down on me. I felt deeply hurt, desperate, anxious, and didn't know what to do or who to tell.



But I always smile at people. I try to keep a positive attitude and give all that I can of myself to others. I live as though each day is the last day of my life.

nurse nor my supervisor at work were able to tell me. Finally, they went to talk with a social worker who agreed to talk with me. First, she began by asking me questions related to AIDS. At that point, my heart began to pound rapidly, and my body began to tremble. She had a sad expression on her face as she spoke with me. That was when I knew the HIV test was positive. In spite of the turmoil inside, I was able to react with serenity.

We were saying farewell to a co-worker who was leaving us that day. I cried a lot during her farewell because this friend was leaving. But I also cried hard because I felt such deep pain about my diagnosis. I wished I'd never been born. I felt like I had been condemned. I didn't want to be around my children or be at home because I would start crying, and I didn't want to have to explain why to my children. I thought a lot about death. What would my funeral be like? Who would take care of my children? How would they react? How would my husband's family react?

I thought about my husband, the one who spoiled it all for me. I couldn't decide whether to hate him or forgive him and keep loving him. I wished he would leave me. I didn't want to ever see him again. I even wished he would die.

During this time I didn't sleep well. I didn't even want to take care of myself because I thought I would die soon. I lost the will to live. I felt like all my dreams and wishes had been cut short. I felt like the most unfortunate person on the planet, like all I had ever experienced in this life was suffering. But Jesus with his tender love comforted and continues to comfort me through his Word, like in Isaiah 54. Now I feel like I am past that initial stage of shock. Everything is so much different than what I expected. I continue to believe that nothing is impossible for God when one is doing his will!

What has it meant for me to be living with AIDS?

Emotionally: At first I felt as if my whole world had come crashing down on me. I felt deeply hurt, desperate, anxious, and didn't know what to do or who to tell.

Socially: This is a shameful disease. I thought everyone would despise me. I thought I would feel isolated from friends and co-workers, since AIDS is an infectious disease. Thankfully this has not been the case. I receive the affection, support, understanding and love I need from my friends.

Spiritually: People who know I have AIDS are surprised by my attitude. I do not worry. I am well aware that death is a law established by God as part of life. I realize that even if I didn't have AIDS I would die some day. I believe that God uses trials to teach us and help shape our inner life. The way we respond to the difficulties life throws at us will determine our future. When a broken person bows to God's will and seeks God, putting her faith in the sovereignty of God, her faith will grow. In the bible, Saul saw the giant and was afraid. But David saw the same giant and conquered him.

Physically: I have lost about 18 pounds and don't have much of an appetite. My skin is very dry and sensitive. I overreact to insect bites. I am very sensitive to the sun and to the rain.

But I always smile at people. I try to keep a positive attitude and give all that I can of myself to others. I live as though each day is the last day of my life.

My advice to you is that each couple should jealously guard their relationship with each other and cherish each other. Be honest with each other. If one of you makes a mistake and sleeps with another, then tell your spouse and do not have sexual relations with your spouse again until he or she is tested for HIV. ♦

Finding peace in Cambodia's new war

I returned to Banteay Meanchey Province after the Pol Pot regime (the Khmer Rouge years). My parents and five brothers and sisters all died during this time. I came back to live with my uncle. Before the Pol Pot regime, I had gone to school for three years but was already too old for more schooling after the Pol Pot Regime.

My uncle arranged a marriage for me. I was happy with the marriage, and we had one daughter. My husband was very good to me. He often traveled to the Thai border for a month or more to make money for us to live. He died in 1995 from TB. After he died I went to work in Phnom Penh in a beauty shop. I did not have any boyfriends when I lived there.

Then I started getting sick sometimes. I would have a fever and not feel well. My friends and I joked sometimes that I might have AIDS. I did not think so. After a while I went to Siem Reap Province to get treatment from the kru khmer (traditional healer) there. But I was still sick so I came back to Banteay Meanchey Province. I went into the hospital. The first time they took blood from me they lost it. It took two more weeks until they took my blood again. Then they told me I was HIV positive and had AIDS. It was very hard to be in the hospital and see others die while I was waiting.

I left the hospital to go to my husband's sister's house in Battambang Province. My daughter stays with her. She is now 8 years old. I could see my sister-in-law was afraid. Once she saw me using the soap and asked me about it. She was afraid I would spread AIDS to her because I had lesions on my skin. I bought a new bar of soap for her. I was afraid if I stayed there, no one would have "bong skol" (the traditional ceremony at the time of death to send the spirit to a good place) for me. In the hospital I had been thinking

about becoming a Buddhist nun and so I came here to the wat.

At the beginning I did not tell them about my disease. I was afraid they would not let me stay. But now they know and take care of me. People bring me food the same as for the other nuns. They like the sound of my voice during chanting. Sometimes I think I should eat separately from them but they say no, we must eat together. I feel good living here. The other nuns make me feel comfortable and loved.

Cham Roeun (staff from Dhammayietra—Mongkol Borei) has helped me a lot. He's made me believe that I could get better and take care of myself. He visits often and explains a lot. He gives me the medicines I need. I am fatter now than I was before and not so sick. I want to live a long time yet.

I saw my daughter a few months ago. I hope she can continue to go to school. I want to see her again but I'm afraid. Now I dress like a nun with a white shirt and shaved head and maybe she will be afraid of me because I don't look like her mother any more. When I saw her last she would not take the money I wanted to give her. She thought I was poor and needed the money. Maybe I can go see her soon. ♦

by Keov Mao as told to Arlys Herem of Dhammayietra—Mongkol Borei

Keov Mao is 31 years old and lives in a wat (Buddhist temple) in Mongkol Borei District in northwest Cambodia. She sat in front of her small thatch kut (house for nuns) in the wat as she told her story. Her serene face often smiled as she talked.

The **yei gees** are women who choose to live at the wat, most often but not always after their families have grown. They have several roles: service to monks (cooking and cleaning); participation in ceremonies at the wat or in the home, especially for those who are sick and dying; visiting "shut-ins" in the community; and practicing religion through chanting and meditation in their daily life at the wat.

Dhammayietra—Mongkol Borei is a peace and nonviolence group that began "walking" with AIDS patients in northwest Cambodia in 2001. Dhammayietra is a Pali word that translates as "peace walk" or "pilgrimage of truth" and began as peace walks across Cambodia during the war years. This Dhammayietra has begun its walk with a home care program and has taken first steps toward encouraging and supporting communities to respond to this latest war with compassion and help for its victims. MCC has given funding to this organization.



The children of AIDS

by Hluphekile

The author of this article has chosen to call herself Hluphekile to protect the identity of her grandchildren. It has the same meaning as her real name. She is a retired educationalist from Bulawayo, Zimbabwe.

I had four beautiful children, three sons and a daughter. Two have gone on before me.

In my culture names have a great significance. They are given in relation to the circumstances surrounding the birth of the baby and so have a story to tell. If the parents are going through struggles and pain, it is not always a good idea to express their frustrations through the naming of the child. Some names affect the character of the child, and he or she has to bear that burden for life. I was born when my parents were going through a very difficult patch in their marriage. My father had married a second wife, and my mother was being ill treated so she named me Hluphekile. A literal translation of this means "a person who suffers" or "one who will bear many sorrows."

I am a teacher by profession. During my first year at Teacher Training College, I met the man who was to become my husband. He was a known womanizer, but he swept me off my feet. I married him after a courtship of nearly seven years. Like so many foolish girls before me, I thought he would change but he never did. We had a turbulent marriage which ended in divorce after the birth of four children.

I have always wondered if the life my husband and I led influenced my children's behavior and life choices. I have had my share of life's challenges, but this time

I wish to address what has become my greatest burden. I had four beautiful children, three sons and a daughter. Two have gone on before me. Between them, they left nine grandchildren who are a comfort and bring me joy.

In 1997 my three sons all became sick with TB. The eldest and the youngest were in the same hospital in the city where I live, but the middle son was in another. God laid his hand on them, and they recovered and went back home to resume their normal lives. My eldest son and his wife drank a lot and neglected their children. Sometimes they even neglected to buy enough food for the family, and I had to keep chipping in. One time when my son came to borrow money to buy food until he would be paid, I was shocked when I looked at his face. His skin had that dead look so familiar in those stricken by the incurable disease. Many months later when I was visiting him and his wife, I found both of them coughing badly. During the visit I noticed that their hair was becoming very thin and straight. Fear stabbed my heart. I could read the signs. I was already involved in my church's effort in the battle against HIV/AIDS. We had been taught about the symptoms of the killer disease.

When I had lost my daughter who died of Cerebral Malaria, one of my nieces had given me the book *We Miss You All*. It was Noerine Kaleeba's story of AIDS in the family. When I looked at my son I wondered, "Could AIDS have come to my family?" I hoped I was wrong. My son was very loving. I didn't want to lose him in spite of his irresponsible behavior. When my children's father was alive, we consulted on family issues and gave each other support though we were already divorced. When he died, this son became the head of the family. I depended so much on him. Cautiously I encouraged my son and his wife to go and get tested for



all possibilities. They had had their own share of marital problems. After one of their quarrels, my daughter-in-law had taken off and was away from home for over a month. Only God knows what each of them did during that month of separation. The child who was born after that never lived with them. They gave her away to her brother's family who adopted her in our own traditional way. This was because the mother was not well. Actually my daughter-in-law never regained good health after that.

After testing, they were immediately put through a course of treatment for TB. Both lost weight rapidly. As a family, we did all we could to support and care for them. We spent a lot of money on vegetables and fruit for them. We supplemented their diet with health foods. We talked positive and pointed them to Christ. We gave them hope. When my daughter-in-law became bedridden I sought the services of a trained Home Based Care Giver. She looked after her right up to the end and did such a great job of it. I will forever be grateful to her. She had a big heart.

On January 26, 2000, we laid my daughter-in-law to rest. We never announced it to anyone, but we knew. Close family members knew. Other people knew and whispered. My son and I talked. He acknowledged that the signs pointed to HIV/AIDS. The death certificate confirmed it. We talked about the care of the children. I wanted him to move in with me so that I could help care for the children. He refused because he felt he could manage. He promised that he'd come home when he could no longer cope.

Less than six months later he came. I can still remember the day. He was feeling very weak. He just needed a long good rest. If he knew his children were getting good care, he could rest well. I rearranged my home to allow for the addition of my son and four children. The caregiver who had looked after his wife came to help me with him as we started the long walk to the end. After the death of his wife, my son had been careless. He had indulged in a relationship with another woman when he knew well how sick he was. That was not good and now he was so weak he

could hardly walk. Toward the end he had meningitis. I had many sleepless nights when I wrestled with God in prayer. I cried for the loss of life. I cried for the salvation of his soul. I cried for the motherless children. I clung to him but also allowed myself to let go. God gives and takes. However deep the pain, God brings healing in his time. My time would come. On December 14, 2000, on his birthday, my son breathed his last breath.

I had retired from teaching. Caring for my son had exhausted all my resources. He did not leave much of a pension because he had worked a very low scale job. When he died I had to take care of his debts and care for the children. The government aid to AIDS orphans is not sufficient to cover all their educational needs. I am a grandmother who overnight became a mother again. Where does a person go to resign from parenthood? One of the children does not look well, but I will try not to worry about this until it is time to do so.

In my culture, after a burial we sometimes say, "It is finished." Yes it was finished. We had closed a chapter in the life of my son. He and his wife were now part of history. I could not allow myself a long period of mourning. I had to pick up the pieces of my life and go on. I serve my church as a Co-ordinator of Care Supporters in the fight against AIDS. Much of my time is given to training volunteers, and visiting and counseling the sick and their families. Sometimes this opens old wounds, but I must help support others as they walk along this road. Parents need to be helped to acknowledge the presence of HIV/AIDS among us and to agree that our children could be victims. When they are sick, we should not hide them away. Knowing and seeing them could save a life. As much as possible, the sick should be cared for at home. They die with dignity, surrounded by loved ones. Above all we need God. If I did not have the presence of God in my life, I would have died when my son died. ♦

Parents need to be helped to acknowledge the presence of HIV/AIDS among us and to agree that our children could be victims.

Caring for the sick

by Sharon Dirks

Sharon Andres Dirks is originally from Niagara-on-the-Lake, Ontario. She's been married to Rudy Dirks for 21 years and has three children, Nathan (18), Shawna (15), Stephanie (12). They have been in Botswana for six years serving under Africa Inter Mennonite Mission.

In Botswana, where I live and work, we are living in a culture of death. Funerals are a way of life for people. It drains them physically, emotionally, economically and spiritually.

I wish I could get used to it. To a certain extent, I think there comes a time when the constant reality of death around me is not as painful as it was at first, but then suddenly it becomes too much to bear again.

In Botswana, where I live and work, we are living in a culture of death. Funerals are a way of life for people. It drains them physically, emotionally, economically and spiritually. Why is the message of hope and the need for a change in behavior so difficult to bring to a country that is so "Christianized?" Why is a move from denial to truth so slow in coming?

Two weeks ago, two pregnant teenage girls came together to the clinic where I provide counseling for pregnant women, those who want HIV testing, and people living with HIV or AIDS. These two young giggly teenage friends were coming for the routine voluntary testing of HIV for pregnant women. It was time to collect their results. Carefully preparing each of them for the possible outcome of the results and what they would do if they were HIV positive, I had to break the news to one of them that she carried the virus. The giggling stopped as the reality of her future sunk in. How many more young women are not paying attention to

the message they are bombarded with in the media, at school, on every street corner about the deadly virus? How many think it will never happen to them? How can it not happen to them when 35 percent of the population is already infected?

It turned out to be a particularly stressful day. Four people who came to see me to pick up their results were HIV positive. One woman didn't need a test but wanted to show me her unsightly rash—herpes zoster (shingles)—over most of her body. HIV positive for 10 years, she wanted to know if this was a sign of AIDS taking over her body for the last time. I explained that I am not a doctor, but we talked about how she had managed to stay relatively well for such a long time and what she could do to keep well longer. Another one, a tiny 23-year-old woman, who already had late stages of tuberculosis, looked very frail. She went home with the news of her results and returned minutes later with her mother. I helped her break the news to her sobbing, broken-hearted mother. I put my arm around her but steeled myself against my own need to sob for this whole country. I waited for my turn to cry until I got home. It doesn't happen as often as when I first started counseling. Then I poured out my day to my husband, Rudy, crying for the lost future of these young people.

That was a difficult day. Those are the days when I wonder how long I can manage this type of work. But there are the bright days when someone comes to the center and gets a negative test result, motivating them to make radical life changes, or a young pregnant woman comes in hungry for learning about healthy relationships. One woman brought in her boyfriend, and we had some wonderful sessions together as they discovered things about communication, honesty and commitment (often a rare commodity here). The marriage plans are not all complete yet, but they are now living a much healthier life, serious about their commitment to each other, and about abstinence outside of marriage and faithfulness within marriage.



There are also HIV positive mothers who have volunteered to join the Prevention of Mother to Child Transmission program, taking anti-retroviral medications and refraining from breast-feeding their babies. I thank God for them because another child has probably been saved from the deadly virus.

On a personal note, God has blessed Rudy and me in our ministry here in Botswana. To work with people in their time of pain and suffering has been a natural extension of the Bible teaching we came here to do.

We share the message of hope and healing and God's grace through Jesus in a personal way through counseling.

So, will I ever get used to living in a culture of death? I don't think anyone does. My Batswana friends don't. But maybe that is just what it takes to keep them from being complacent in the face of the enormity of the problem. It helps me depend on the power of the Holy Spirit and God's loving care and the compassion of Jesus to bring some hope and grace to God's children in Botswana. ♦

We share the message of hope and healing and God's grace through Jesus in a personal way through counseling.

Only God knows the future

I grew up on a farm in the Natal region of South Africa. I never knew my mother, who left my family when I was a baby. My father disappeared from the farm when I was ten years old, leaving me alone and vulnerable. At the age of 13 the abuse started; I was raped many times by the white farm owner. When at 14½ years I was found to be pregnant, I was forced to have an abortion and sterilized. I did not know at the time that I was pregnant, and of course, did not know I would never bear my own children.

I ran away to a nearby town for two years where I was caught by police, accused of stealing jewelry. Although I was sentenced to six months in jail, the farmer paid my fine. I married an old man, the teacher on the farm, to be rescued from the farmer. My husband died in 1985. I had come to hate sex and have never married again.

I tried to bury the pain of the sexual abuse and didn't speak of it for 39 years. I was sick with my grudge and hatred against the farmer. In 1998, when a white woman friend took me in while I was ill with malaria and pneumonia, my hatred of white people spilled out. I listened to a Christian radio program in which the speaker talked about forgiving and forgetting, how one must release hatred to receive blessing and healing. I began to cry and finally spoke of my experiences to my friend, the first person to hear my story. In my tears and telling, I came to

know a peace of heart and was able to forgive the farmer.

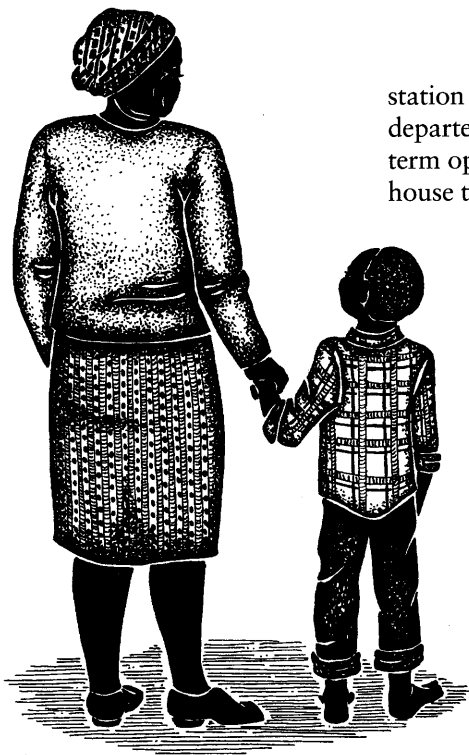
Twenty years ago, I was in an accident and was given HIV infected blood transfusions. Today, I am a 52-year-old woman and living with HIV/AIDS. But being HIV positive does not mean failure but a stepping-stone to success. That is the reason I have not let my childhood experiences and HIV infection wreck my life. I have committed myself to others with HIV/AIDS. I started a children's home in the small town of Mpumalanga near South Africa's Kruger Park for homeless and at-risk children on the street because when I was abused I had no one to turn to. I didn't want this to happen to these children. In the early 90s, while working as a clothing store manager, I saw children stealing and couldn't bear to see the condition they were in. When I asked them why they were stealing, I found they were hungry and so I began to feed them. Some of the children's family members had died of HIV/AIDS, and some of their fathers were fired from work because of HIV/AIDS.

I started teaching women at a nearby sugarcane farm about hygiene, STDs, etc., and the children would sneak in to be fed and sleep there. The police accused me of encouraging the children by feeding them. I was told to get rid of the children or go with them, so I quit work to be with the children full time. They slept in the train

by Grace Busisiwe Mashaba

Grace Busisiwe Mashaba grew up in Baberton in the Mpumalanga Province of South Africa. She is the founder of Malelane Peace Centre in Malelane, South Africa, which provides housing, food, support for education, and love to 50 street children, some who are HIV positive.

I try to give orphans of HIV victims a chance to live their lives normally by giving the love, support and hope they lost when their parents died.



station after the last train of the night had departed, but I knew this was not a long-term option. Finding a very reasonable house to rent, I was asked how I would pay the expenses of rent, utilities, food etc. Starting with only one pot, I had faith that I could meet the expenses by working as a cleaner.

Thereafter, I started training some women, some who were HIV positive, in needlework in order to get something to feed their hopeless families. I wanted to normalize the children's lives and plant a culture of learning in them. I also taught people in the surrounding farms how to prevent rape and the spreading of HIV/AIDS. Sometimes I visit families of the people in the community who are sick from HIV. I even try to protect their rights so they will be cared for and not seen as evil in their communities.

I try to give orphans of HIV victims a chance to live their lives normally by giving the love, support and hope they lost when their parents died. I do this because

I know that children need a warm love that takes everything that is a problem from them and turns it into a challenge to overcome. Mother Theresa, who did so much in her community, inspired me, and I realized from hearing of her that doing a wonderful job is a matter of love and not personal gain. I could not do what I do without love for the people of Mpumalanga and South Africa.

At the beginning, I did not realize this strength in me. But since people started making recommendations for children to come to me, I told myself that it is time for the children and women to resist abuse, protect themselves from HIV/AIDS, and reduce gender imbalance and dependence. Even though I am living with the virus, too, my slogan is, "My God knows it all, and I'm doing it for my God."

My importance in the lives of the young and old is only measured by the way people from South Africa and overseas volunteers and donate help, making it more possible to continue rendering my assistance to the poor. Only God knows what the future holds for each one. ♦

Honey in the killer's bones

by **Connie Sennye Nonlululeko Thabangana**

Connie Thabangana is from Maun, Botswana. She enjoys cooking, playing tennis, and visiting the sick. She offers information about HIV/AIDS and how to live with the virus.

I remember very well when I came down with a very bad rash on my thigh. I could hardly walk. I showed my thigh to my aunt and could see she was worried. I became a regular client at the STD Clinic with this skin problem, and my hair falling out because of ring worm. A dermatologist suggested an HIV test, but I was under age to have a test on my own and my parents didn't approve. When I went for my next check up, the doctor suggested a test again. I agreed. I was asked to come for the results after three weeks. As I waited I continued with my wild, crazy lifestyle. I knew about AIDS but hadn't thought to be tested for HIV. When I went for the results and check up, the nurse looked so serious. She asked me if I was ready to receive my results. I agreed, and she told me I was HIV posi-

tive. She said my blood had the virus so I should take care of myself, and that was it.

I didn't believe her. I didn't accept that I was going to die. I kept on with the wild, crazy lifestyle. I did not tell anybody. As time went on, I got angry and didn't know what to do about it. That same year I went to Maun (in northwest Botswana) where I had a boyfriend. We stayed together without any problems. We loved each other so dearly.

I tried to ignore my feelings about being HIV positive and to get on with life. I tried to tell my boyfriend but feared he'd leave me if I told him. I would sit all day listing the guys in my life that I thought might have given me AIDS. After my boyfriend was transferred to another location, I fell in love with another man. I went back

home and visited my aunt. I had always felt a deep bitterness toward my parents because when I was born, my mother and father were not living together. I was raised by my grandmother and aunt. When I found out I had AIDS, it suddenly seemed vitally important that I mend those relationships. I didn't know where to start. When I told my aunt I was HIV positive, she asked many questions that cleared my vision. We talked about the past and planned for the future. We grieved together. That gives me a lot of joy.

Back in Maun, I tried to avoid my HIV status, but some days I went inward like a snail in its shell. I often felt sad and depressed. Other days I would go out and drink. I started to visit Maun Counseling Centre and volunteer, helping with the kids and in the office. This helped me a lot because I always had had this feeling that I deserved AIDS. I realized I was not alone, that AIDS is definitely a tragedy. I received counseling, support and love. I met people living with the virus around the country. I soon worked full time with the Maun Counseling Centre, in education outreach where AIDS videos were shown. I came out publicly with my HIV positive status on March 17, 2001 at Maun Counselling Centre. I believe it was a call from God to help the nation, especially the youth to remain HIV negative.

One day a pastor told me he wanted to see me. I knew he wanted to talk to me about Jesus. He gave me some scriptures to read, prayed for me and invited me to go to his church. I couldn't wait until Sunday, so at a Thursday service gave my life to Jesus and was born again. My life slowly started to change. I went to church every Sunday, learned to pray and realized that God loves me. Life does not add up like a mathematical equation, but with God nothing is impossible. AIDS has forced me to stop and take a good look at my life. I am so ashamed of some of the things I have done, the way I've lived, people I have hurt. I can't see how God can forgive me, I feel so guilty. I pray and bring out everything in the open and ask for God's forgiveness. The prophet Nehemiah tells us, "God is forgiving, gracious and compassionate, slow to anger, abounding in love." Not only are my sins forgiven, they are forgotten. The prophet Isaiah tells us that:

Though your sins are like scarlet,
they will be as white as snow.
Though they are red as crimson,
they will be like wool.

The gospel writer Luke tells of a woman who had been bleeding for twelve years. No one could heal her, and yet immediately after she touched Jesus' cloak, her bleeding stopped. The power of Jesus? The opening of the woman's heart? Or both?

I pray to God to heal me and give me more years to live, at least 30. I hope God answers my prayers as much as he healed Hezekiah and gave him 15 more years to live. AIDS kills everyone who has it. People ask me how I can have any hope. Wouldn't any hope be false? Hope is different from expectation. Expectation means we assume something will happen. Hope means we are open. If your hope is fading, you are relying on yourself too much and you need to place your hope in God.

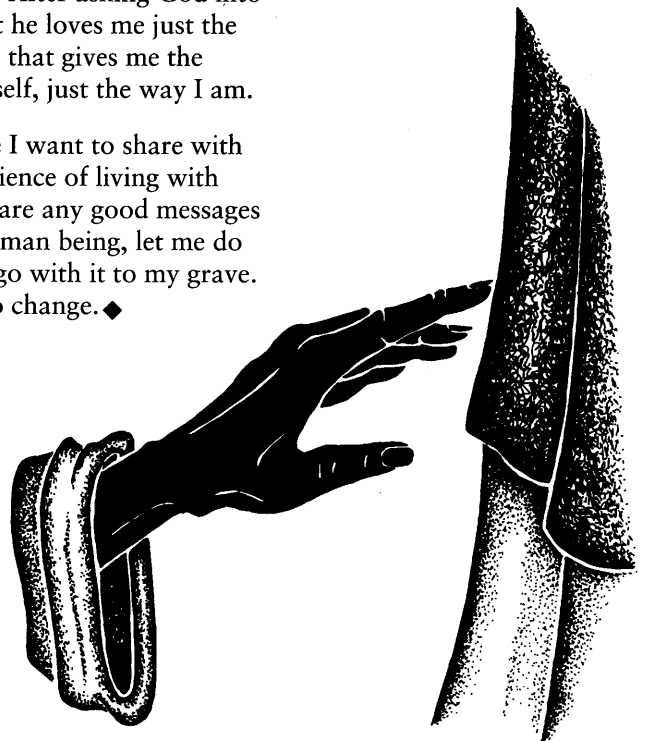
I realize that some things have happened in me that could not have happened if I had been physically well, like the healing of my spirit, an acceptance of myself, an opening to God. So in a way I am healed.

Because of AIDS two things have happened for me: I am physically too tired to keep changing all the time, and I see how senseless it really is. After asking God into my life I realize that he loves me just the way I am. Knowing that gives me the courage to love myself, just the way I am.

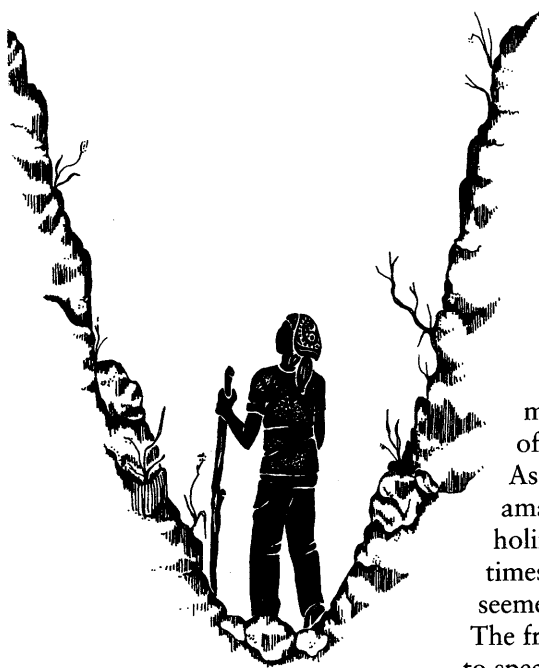
Through this article I want to share with the world my experience of living with HIV/AIDS. If there are any good messages I can give to any human being, let me do so now, let me not go with it to my grave. It's never too late to change. ♦

Life does not add up like a mathematical equation, but with God there is nothing impossible.

Not only are my sins forgiven, they are forgotten. The prophet Isaiah tells us that.



Walking through the valley of death



by Carolyn Couillard

Carolyn Couillard is 55 years old and lives in Vancouver, British Columbia. She is a spiritual director and involved with her local church. She worked in full-time ministry until she married Paul at age 38. They were married from 1985 to 2000.

The pain of not being cherished as deeply by Paul in the last part of our marriage, as well as my inability to deal effectively with pain and its resulting lethargy, left me with a profound uncertainty as to who I was.

When my husband went on full-time disability due to AIDS, I only had a glimmer of an idea of what the valley of the shadow of death looked like. As things unfolded, I was quite amazed by how much beauty and holiness existed in that landscape. At times the intimacy of God's presence seemed more tangible than ever before. The freedom and empowerment we felt to speak about God's grace in our lives was a dynamic experience for both of us. Whether in a classroom, from a church pulpit, or with people individually, we felt the joy of being able to share God's unlimited compassion. Of course, there were days of pain and fear, but that shared experience only deepened the relationship between my husband and me.

Then along came the new drugs—the protease inhibitors—and not only was the ravaging course of AIDS halted, but we delighted in Paul's returning strength as well. The reversal was so dramatic, not only in Paul's body but also in the lives of so many other people we knew living with HIV. Spring had come and the blossoms of new life were everywhere. Paul was even able to go back to the work in architecture that he reveled in.

But for Paul and me, spring faded into the hot enervating days of summer. It began to matter again that Paul was gay. The strain for Paul of being something that he wasn't—a heterosexual married man—was inexorably sapping our relationship. Despite our compatibility, Paul's infidelity and my chronic pain from childhood polio were placing a burden upon Paul that he was finding too hard to carry. Despite our ability to honestly communicate with each other in therapy and at home, Paul decided that he had to leave our marriage. So with many tears by both of us, we began a slow and painful process of bringing to a close the attachment that we had built over fourteen years of marriage.

I don't regret the time given to focusing on Paul's health. The ministry we shared and the energy we both extended to prolonging his life provided chapters to my own story, which I review with gratitude and deep love. Although we have now been separated for over one year, there is still a strong bond between us. But there is no doubt that I lost a large part of myself in the process. The pain of not being cherished as deeply by Paul in the last part of our marriage, as well as my inability to deal effectively with physical pain and its resulting lethargy, left me with a profound uncertainty as to who I was.

In the process of becoming comfortably settled in my new home, I had experienced so much care from God and friends. But that was followed by several months of listlessness where I didn't do much beyond what was necessary. I could understand better why Paul was frustrated with how I sometimes dealt with pain. But now despite the occasional days when I don't feel centered, I am slowly finding myself again in God and the sheer joy his presence brings. Paul continues to mature as well, and although there is much about sexuality that remains a mystery to me, I can see the dynamic of God's reign in his life. He willingly financially supports me so that I may discover my boundaries within the limited stamina I possess. Working part-time at my church and slowly finding my way in a new area of ministry in spiritual direction speaks to the deepest part of who I am becoming.

In addition to Paul paying for my training in spiritual direction at seminary, all that I experienced with him has laid a solid foundation for helping me to grow in this area of ministry. Both joy and pain provide effective catalysts in expanding my heart so that I may walk with others in their story. I am discovering anew that endings, no matter how difficult, are never final. They just make room for the beginning of new chapters in my life. ♦

Katie's legacy

I discovered I was HIV positive in 1994. I had been suffering from a very bad cold and had passed it on to my six month old baby, Katie, who developed pneumonia. After several tests, the doctors made the shocking discovery that Katie had AIDS. My husband, Lloyd, and I were tested, and we discovered that I was HIV positive and he was negative. I had been carrying the virus for four years, totally unaware that I had been infected. I had made the common assumption that gay people and drug users got HIV and had not considered myself at risk. I was 35 and had very few relationships since I was 18. One of them had been a seven year marriage, which had ended due to infidelity on his part. I must assume that I contracted HIV from one of these relationships as I have never discovered who infected me.

Katie died just three months after we were given her diagnosis, and we kept her cause of death and my illness a secret from family and friends. Our doctors were the only link we had to the reality of it all.

We lived in a small town, with a lot of ignorance about HIV. Eventually, we had to decide between continuing to listen to our friends' ignorance and discrimination about the disease or educate them by coming forth with the disclosure of what had happened to our family. We chose full disclosure to family, friends, the public and the media. It was a scary decision, and we weighed the possible results very carefully. One of the results of this disclosure was my

decision to try to make amends for infecting Katie and subsequently losing her. I started an organization to work with children infected and affected by HIV/AIDS in British Columbia. The organization, Hummingbirdkids Society, was founded. While I'm no longer involved with it, it continues its work of advocacy and services to families who deal with the challenges of HIV/AIDS in their homes. I have also been involved with Positive Women's Network and two "people living with AIDS" groups in British Columbia. Today I volunteer with Doctors Without Borders, a group concerned about HIV/AIDS issues but focusing on other health issues as well.

When asked to write this article and how it felt to have HIV, I wanted to say that we have learned to live with it, and it has changed our lives to one of helping others with the disease and made us appreciate what a wonderful thing it is to be alive. While this may be true, I would be much more candid with you if I told you that the guilt, sorrow and depression this disease brings with it are almost unbearable. HIV is a daily torment. It consumes our lives and is made so much harder when people decide to place their judgement on how I got HIV and whether I deserve it. When I already feel as bad as I possibly can, how can this make me feel better? God has given me the strength to educate people as much as I can and without him and my wonderful husband, I would have crumbled a long time ago. Living with HIV is like living daily in hell. ♦

The author chooses to remain anonymous.



HIV is a daily torment. It consumes our lives and is made so much harder when people decide to place their judgement on how I got HIV and whether I deserve it.

A mother's story

I would like to take you on a journey that I have been on since 1995. It is a journey that I now can honestly thank and praise the Lord for. Back in the 1980s when we all first started hearing about AIDS I thought, "Thank goodness we don't have to worry about that because after all AIDS was a gay disease, and our children weren't gay!" How wrong we all were!

AIDS can strike anywhere, anyone and, let me be so bold as to say, even in the church (but that's another story).

My husband and I had both retired from very stressful jobs (me in banking, him in trucking) and had just started a small business of our own when our oldest son moved back home while he was attending

by Dena Kasdorf

Dena Kasdorf lives in Langley, British Columbia. She and her husband Peter have five children and seven grandchildren. She attends Cloverdale Baptist Church.

There are many times when I slip and I think, "Why me?" Then I remind myself that God's feelings for me haven't changed.

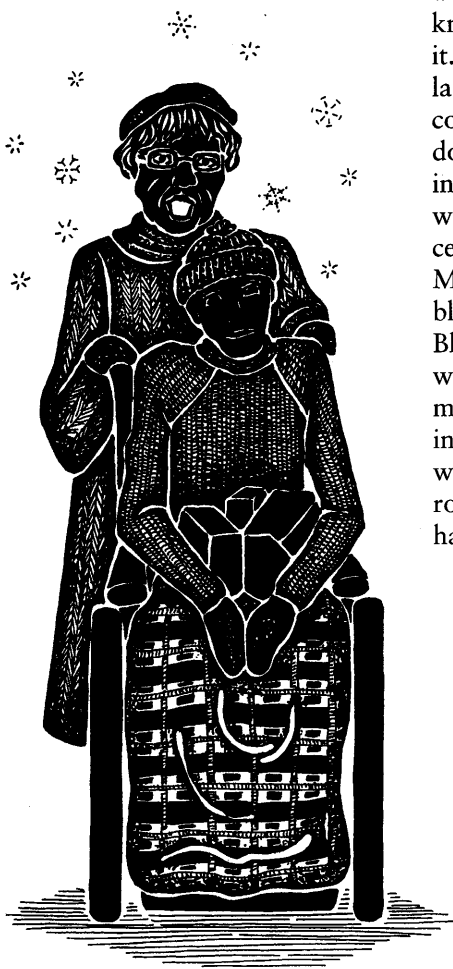
We were told that he had three weeks to live. Thus began two years of round-the-clock care for Terry.

college. Terry really enjoyed returning to school and his first term was very successful. On a family outing that summer, playing catch with his nephew, he kept missing the ball. This was unusual because he was a very good ball player. That fall he went back to school and started complaining of not being able to see properly. He also couldn't retain any memory. Needless to say, he failed all his tests and was forced to repeat courses. He started going to doctors and specialists, but nobody could tell him what the problem was. By this time my sixth sense was kicking in, I like to say my teeth itched because there was something wrong but I couldn't get at it. He kept going to doctors, and Terry by this time was so blind that he needed to be driven everywhere and could not cross streets alone. One day coming home from one of his appointments, I asked him "Terry, are you HIV positive?" He nodded his head, he had just found out ten minutes earlier. We went home, told his father and the three of us joined together in prayer. We never asked Terry how, when, where or who. Our main objective was to get help. Terry's doctor put him on Sulfa, not knowing Terry was terribly allergic to it. He had a Grand Mal seizure, which landed him in St. Pauls Hospital in Vancouver, British Columbia. We changed doctors, and had an MRI done and were informed that Terry had full blown AIDS with Progressive Multifocal Leukoencephalopathy, which means Progressive Multiple Lesions. These lesions were blocking signals from the brain to his eyes. Blind, paralyzed on his left side, and in a wheelchair, Terry was put on a cocktail medication and sent home for Thanksgiving 1996. We were told that he had three weeks to live. Thus began two years of round-the-clock care for Terry. Since we had just started a business, his siblings

pitched in and with the help of a home care worker, we were able to cope. While Terry was still in the hospital, it was a very trying time. I went to see him every day, came home, and went to work. I seemed to be praying or crying all the time, and one day I came home from seeing him and I lifted my arms up to the Lord and said, "He's yours, take over, You are in control anyway." I felt such a peace, and after that I could cope with whatever came along.

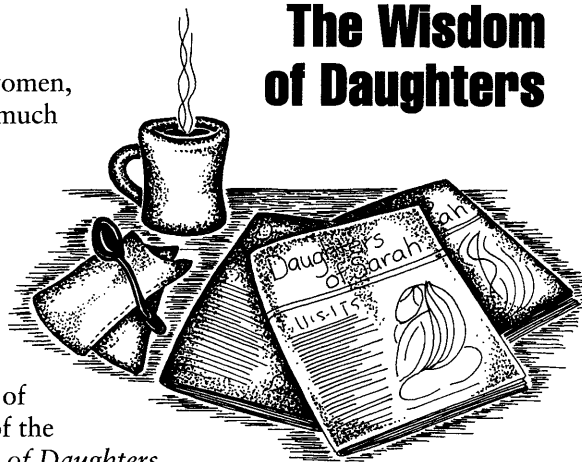
Terry became a Christian shortly after he came home. His hunger for the Lord was awesome. He had the pastors lay hands on him and to this day witnesses every opportunity he gets. He was well enough that first Christmas to go Christmas shopping at the mall (blind and in a wheelchair). He is still on the same cocktail medication he was originally prescribed. This is not normal because most AIDS patients become immune to their medication and need stronger or different medications. Terry also has part of his vision back. His peripheral vision is gone, but he can see enough to cross streets. He walks without any aid. He also married one of his home care workers.

As with any journey we take, we always ask the Lord to be with us, and he surely has been. We also have met people on our journey, people who help us, and pray for us: Pastor John Hiddema, Art and Ruth Thiessen, the many people at MCC in Abbotsford, Terry's Christians in AIDS group, the list goes on. There are many times when I slip and I think, "Why me?" Then I remind myself that God's feelings for me haven't changed. He is constant and faithful, even when we are not. I know that I have become a much stronger Christian as a result of Terry's AIDS. I know that Terry is a very strong Christian. I know that our family is closer to each other and to the Lord as well. I know that I would not have managed this journey without the Lord taking my hand and guiding me. Psalms 34:4 says, "I sought the Lord, he answered me and delivered me from all my fears." I hold onto this verse. These are just some of the reasons why I thank and praise the Lord for this journey. ♦



BOOK REVIEW

The Wisdom of Daughters



I have often thought I was born too late. With my passion for social justice, particularly concerning women's issues, I am constantly searching for magazines and other publications written by leaders in this field. When I was barely beginning my college experience, the *Daughters of Sarah* magazine was ending 21 years of publication. The magazine had been a forum for Christian feminists to express their views on the struggles and issues of the day.

The Wisdom of Daughters brings together a compilation of the women (and men) who named social justice struggles in *Daughters of Sarah* and gave creative ideas for ways to improve these struggles. This book allows people who appreciated this magazine to receive the best of it again, and it allows people who did not have the opportunity to subscribe to the magazine the chance to savor some of its amazing tastes.

The book is divided into 10 chapters, each with a different theme or issue that the magazine covered. The articles chosen are from a variety of the authors who have written for *Daughters of Sarah*. Each article is preceded by a paragraph about what the author did at the time of the writing of the article and now. *The Wisdom of Daughters* includes articles concerning women in scripture, women (and men)

in ministry, God as She, women, society, social justice and much more. The editors, Reta Halteman Finger and Kari Sandhass, compile a great variety of poems, articles and drawings from the best of *Daughters of Sarah*.

With the obvious division of topics and easy indexing of the information, *The Wisdom of Daughters* is a great resource for anyone who advocates for or is interested in women's concerns and the voice of Christian feminists. Its articles, poems and drawings were on the forefront of women's concerns in the time they were written and still continue to be relevant today. ♦

by Tina Hartman

Tina Hartman currently lives in Ephrata, Pennsylvania. She is the administrative assistant for Peace and Justice Ministries, MCC U.S. and is a member of Blossom Hill Mennonite Church.

MCC's response to AIDS

Mennonite Central Committee has begun a 10-year, multi-phase response called **Generations at Risk** in support of the church worldwide as they provide care to HIV/AIDS sufferers and orphaned children and seek to make the changes necessary to protect the next generation. The church has asked for support in providing testing and in helping people learn about preventing HIV transmission. Pastors are asking for training in preaching and teaching openly about this health and sexuality issue in environments where denial is strong.

While HIV/AIDS has frequently been associated with homosexual lifestyles here in North America, in Africa and other places it is nearly entirely transmitted by heterosexual practice. Cultural and traditional practices such as wife inheritance, designed to provide security for widows and children, now bring death.

AIDS is driving a ruthless cycle of impoverishment as the wage-earners lose their ability to provide food and income. Girls are frequently most affected as they are asked to leave school more often than boys to care for sick family members. Girls assume family responsibilities like finding firewood, carrying water, and preparing food.

Be part of the hope and support. The church is making a difference and will contribute substantially to the reduced infection rate as they carry out their plans to reduce the risk for future generations.

- \$50 covers the cost for one pastor to attend a seminar on grief counseling and provides resources on biblical teaching about God's plan for human sexuality.
- \$15 buys three blood testing kits
- \$41 provides one home health care kit
- \$204 covers a child's school supplies and fees for one year

Christa Taylor
a Mennonite

Christa Taylor has been appointed to the faculty in Biblical and Religious Studies at Fresno Pacific University (Mennonite Brethren) beginning fall 2002. She will teach in the Contemporary Christian Ministries and Intercultural Studies programs.



Mennonite
Central
Committee

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PERIODICALS
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NEWS & VERBS

WOMEN'S CONCERNS REPORT

Looking Forward

SEPTEMBER-OCTOBER 2002

Women who have
left the church



NOVEMBER-DECEMBER 2002

An Anabaptist theology
opposing violence
against women



JANUARY-FEBRUARY 2003

Looking back: Former
Women's Concerns' staff



MARCH-APRIL 2003

Healing from and
preventing abuse:
MCC's work

On March 8, **International Women's Day** was celebrated around the world. In Colombia, men were barred from the streets for six hours. Police in Ekaterinburg, Siberia, gave women traffic offenders flowers or perfume instead of tickets. The Romanian government offered jobs to 20,000 unemployed women. Even with these celebrations, global aid organizations reminded people that women in developing countries continue to face many struggles. The International Committee of the Red Cross focused on the plight of women and girls caught up in 25 armed conflicts worldwide. Amy Erickson, an MCC worker in Kikwit, Democratic Republic of Congo wrote about her experiences with a group of Congolese peace activists on International Women's Day, "Congolese women on all sides of the conflict have come together to celebrate. They hold signs stating *Where there is division, let us bring unity . . .* These women are a sign of hope for me today, hope in the endless possibilities that this country holds. Hope that the mission of reconciliation that God has

given us is not abandoned, but that God actually works through our differences to create a more just and peaceful world."

In the midst of the violence in the Middle East, **Bat Shalom** is a feminist peace organization working toward a just peace between Israel and its Arab neighbors. Bat Shalom, together with The Jerusalem Center for Women, a Palestinian women's peace organization, comprise The Jerusalem Link. For more information, visit their web site: <http://www.batshalom.org>.

Women are especially vulnerable amid ongoing **violence in Liberia**, where rape has been used as a war tactic. MCC is providing \$16,100 Cdn./\$10,000 U.S. to purchase a two-month supply of rice and palm oil for 360 households of sexually assaulted women and their children. As MCC has no personnel based in Liberia, the relief funds will sent through Action by Churches Together (ACT), a consortium of church-based relief organizations, and administered by a local partner organization that focuses on assisting women and children who have been raped and maimed.